the quality of life for his constituents through his involvement in groups such as Genesee County Violence Prevention Coalition, Mott Community College Criminal Justice Advisory Board, and the National Council on Alcoholism.

Art has many times stepped from behind his badge through his work with the Boy Scouts of America, Bishop International Airport Authority, and the YMCA. He has been General Chairperson for the Untied Negro College Fund in Genesee County, President of the Urban League of Flint Board of Directors, and President of the Flint Board of Education.

Mr. Speaker, many people in the Flint area, myself included, have greatly benefitted from Art Evans' insight and experience. He has truly made Genesee County a better place in which to live. I ask my colleagues in the 106th Congress to join me in congratulating him for his dedication and commitment to justice.

PROVIDING FOR USE OF CATA-FALQUE IN CRYPT BENEATH RO-TUNDA OF CAPITOL IN CONNEC-TION WITH MEMORIAL SERVICES FOR THE LATE HONORABLE HARRY A. BLACKMUN, FORMER ASSOCIATE JUSTICE OF THE SU-PREME COURT OF THE UNITED STATES

SPEECH OF

HON. BILL LUTHER

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 9, 1999

Mr. LUTHER. Mr. Speaker, I rise today to pay tribute to the life and legacy of late Supreme Court Justice Harry Blackmun. Ascending from a modest St. Paul Childhood to the Nation's highest court, Mr. Blackmun served the people of Minnesota for decades with his meticulous yet open legal mind before dutifully serving his Nation as Supreme Court Justice for 24 years.

Reflective and courageous Justice Blackmun bore great personal burdens in order to translate the Constitution's theory of liberty into fundamental guarantees for all people. He was a genuine and humble public servant. His passing will be mourned by people everywhere.

THE BREAST AND CERVICAL CANCER TREATMENT ACT OF 1999

HON. RICK LAZIO

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. LAZIO of New York. Mr. Speaker, I rise today to introduce legislation that will allow states the option of providing Medicaid coverage to women who have been diagnosed with breast and cervical cancer through the federal government's National Breast and Cervical Cancer Early Detection Program (NBCCEDP).

This bill would allow women who are screened through the CDC program and diag-

nosed with cancer to help obtain the quality treatment they deserve. The Breast and Cervical Cancer Treatment Act would allow women to focus their efforts on getting well instead of worrying about how they or their family will be able to pay for their treatment.

Currently, screening services through this CDC-administered program are provided to women who earn too much to be eligible for Medicaid but not enough for private insurance. The nine-year-old-program exists in 50 states, in five U.S. territories, in the District of Columbia, and through 15 American Indian/Alaska Native organizations.

The CDC screening program is a terrific success and has saved an untold number of lives. Since its inception in 1990, the program has provided more than 1.5 million screening tests to women who might have otherwise not had access to it.

More than 700,000 mammograms have been provided to primarily low-income women. Of this number, over 48,000 of the tests were abnormal, and over 3,600 cases of breast cancer were diagnosed. In addition, through the 850,000 cervical cancer screenings, more than 26,000 pre-cancerous lesions were detected, and 400 women were diagnosed with invasive cervical cancer.

But frankly, screening and early detection are only half the battle. These proactive efforts must be coupled with a quality plan for follow-up treatment. As the CDC program works today, treatment for these women is—at best—an ad hoc system. Women must rely on a tremendous amount of time and effort from volunteers, state workers, doctors, public hospitals, and others, to find appropriate treatment services for their disease. Follow-up services are very rare, and 5% of women in this program are never even treated. Congress needs to provide a plan that follows through for these women.

In my district of Long Island, the severity of this problem is very real. My staff has dealt with a number of women with varying issues that stemmed from this loophole of care in the current system.

For example, one women from Suffolk County—while she was extremely grateful for the screening programs available to her—often referred to her treatment as "begging" because she often had to get treatment anywhere she could find it

Another constituent with breast cancer felt like her disease was "public" because she found that the only way to get treatment as a women in this situation is to tell every advocate and every doctor about your situation—to make these extraordinarily personal problems public—in the hope that someone can find what you need and help.

Finally, one women chose not to get tested because she knew that treatment would not be guaranteed. This final example is what frightens me the most—some women are avoiding a screening that could save their life because of the potential expense it might cost them

Seeing a need to complete this quality program, I joined with my colleagues Rep. ANNA ESHOO and Rep. ILEANA ROS-LEHTINEN, to sponsor The Breast and Cervical Cancer Treatment Act of 1999. Our legislation will allow states the option of providing Medicaid

coverage to women who have been screened and diagnosed with breast and cervical cancer through the CDC program. In my view, this bill is the best long-term solution. Congress needs to ensure Americans that our government programs are working for them and that Congress is making the right decisions.

I am proud to introduce this critical piece of legislation in an effort to ensure that all women of all income levels will have access to the screening and appropriate and quality treatment to help combat this terrifying disease.

INTRODUCTION OF THE BREAST AND CERVICAL CANCER TREATMENT ACT OF 1999

HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Ms. ESHOO. Mr. Speaker, I rise today to talk about two diseases we all hope to avoid but which often touches too many of our lives—breast and cervical cancer.

Mr. Speaker, breast and cervical cancer are killers. Breast cancer kills over 46,000 women each year and is the leading cause of death among women between 40 and 45. Cervical cancer will kill, 4,400 of our wives, daughters, mothers and sisters this year.

In 1990, Congress took the first step to fight breast and cervical cancer by passing the Breast and Cervical Cancer Mortality Prevention Act. This law authorized a breast and cervical cancer-screening program for low-income, uninsured or underinsured women through the Centers for Disease Control (CDC).

This law was an important first step, but it was only a first step. While the current program covers screening services, it does not cover treatment for women who are found to be positive through the program. The bill I am introducing today with my colleagues, Representatives LAZIO, CAPPS, and ROS-LEHTINEN, takes the next critical step by providing life-saving treatment for these dreaded diseases.

Our bill, the Breast and Cervical Cancer Treatment Act of 1999, would establish an optional state Medicaid benefit for the coverage of certain women who were screened and diagnosed with breast or cervical cancer under the CDC National Breast and Cervical Cancer Early Detection Program.

Thankfully, Mr. Špeaker, we possess the technology to detect and treat breast and cervical cancer. But we must pair this with the will to help women fight these diseases. The current method of providing treatment is through an ad hoc patchwork of providers, volunteers, and local programs that often results in unpredictable, delayed, or incomplete. Our bill would provide a consistent, reliable method of treatment for uninsured and underinsured women fighting breast or cervical cancer.

Mr. Speaker, I am pleased to say that over 90 of my colleagues from both sides of the aisle have already signed on to be original cosponsors of the Breast and Cervical Cancer Treatment Act. These members who have shown their support for this bill recognize that

breast and cervical cancer are not only women's diseases. For the son who has lost a mother, the husband who has lost a wife, or the mother who has lost a daughter, this disease is a family disease.

In the last decade we have made great strides in diagnosing and treating breast and cervical cancer. But the causes of these cancers remain unknown and for many women how they will pay for their treatment remains unknown as well. Mr. Speaker, our hope is that Breast and Cervical Cancer Treatment Act will help change that.

IN HONOR OF AMELIA ASHLEY-WARD, PUBLISHER OF SUN-RE-PORTER PUBLISHING COMPANY BY THE SAN FRANCISCO NAACP

HON. BARBARA LEE

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Ms. LEE. Mr. Speaker, I rise in recognition of the honor bestowed upon Amelia Ashley-Ward by the San Francisco NAACP for her outstanding career in the field of journalism.

Ms. Ashley-Ward is the publisher of the Sun-Reporter Publishing Company and was recently named "Publisher of the Year" by the National Newspaper Publishers Association (NNPA).

The Sun Reporter Publishing Company publishes nine weekly newspapers throughout Northern California, including the Sun-Reporter, the California Voice and the Oakland Metro Reporter. Through these various publications the African-American community is kept informed of issues affecting African-Americans politically, economically, and culturally.

Ms. Ashley-Ward assumed control of the Sun-Reporter following the death of Dr. Carlton Goodlett, its longtime leader. Since then, she has revitalized the company and continued Dr. Goodlett's crusade for social justice.

Ms. Ashley-Ward's achievements in journalism as a reporter, photo-journalist, Editor of the California Voice, Managing Editor and now Publisher of the Sun-Reporter are significant. These awards include the 1997 Woman of the Year designated by the San Francisco Black Chamber of Commerce; the Leslie Urquhart Community Service Award; and the leaders in Action Award in journalism.

Ms. Ashley-Ward is an executive board member of the NAACP, serving as 2nd Vice President.

Ms. Ashley-Ward is also the Founding President of the Young Adult Christian Movement, which is an outreach organization that discusses faith and how to make one's life better spiritually.

I want to join with the NAACP and with community leaders throughout the Bay Area and the nation to pay tribute to the work and legacy of Ms. Amelia Ashley-Ward.

H.R. 473—PROVIDING ASSISTANCE TO FARMERS FOR CROP DIS-EASES AND VIRUSES

HON. PATSY T. MINK

OF HAWAII

IN THE HOUSE OF REPRESENTATIVES Thursday, March 11, 1999

Mrs. MINK of Hawaii. Mr. Speaker, I recently introduced H.R. 473, to ensure that farmers who suffer crop losses due to plant viruses and plant diseases are eligible for crop insurance and noninsured crop assistance programs and that agricultural producers who suffer such losses are eligible for emergency loans.

Pandemics of plant viruses and diseases regularly destroy the crops of entire farms and often the crops of entire geographic areas. A single plant virus or disease outbreak can send farms into bankruptcy and farmers are left without any means of recovering. Agriculture producers can qualify for emergency loans when adverse weather conditions and other natural phenomena have caused severe physical crop property damage or production losses, however, under current law, crop viruses and diseases are not considered "natural disasters" and thus are not eligible for these types of loans.

For example, in Hawaii, the State recently ordered the eradication of all banana plants on the entire island of Kauai and in a 10 square-mile area on the Big Island in an effort to eradicate the banana "bunchy top" virus. A court order required compliance of all who did not cooperate and farmers were ordered to destroy their entire farm and livelihood without any compensation. These farmers do not qualify for emergency loans or disaster assistance and many were left with no other option but to sell their farms.

The survival of our Nation's farmers is largely dependent upon the unpredictable temper of mother nature. We provide our farmers with assistance when adversely affected by severe weather but that is not enough. Emergency loans and disaster assistance must be made available to farmers for crops suffering from calamitous plant viruses and diseases.

H.R. 473 would enable farmers to qualify for crop insurance programs, noninsured assistance programs, and low-interest emergency loans, when devastated by crop losses due to plant viruses and diseases.

I invite my colleagues to cosponsor this worthy legislation and I urge immediate consideration of H.R. 473 in the House.

TRIBUTE TO LILLIAN WEST-ADAMS

HON. BENNIE G. THOMPSON

OF MISSISSIPPI

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 11, 1999

Mr. THOMPSON of Mississippi. Mr. Speaker, today I pay tribute in memory of a dear friend who recently passed away, Mrs. Lillian West-Adams. Mrs. West-Adams was indeed a friend to me and many people in her community and will be missed by all.

Mrs. West-Adams was born December 17, 1940 in Bolton, MS. She was the third of four children. Her education began in the elementary and secondary schools of Hinds County Public School System. She went on to receive a Bachelor of Science Degree in Home Economics from Alcorn College in Lorman, MS.

She left Alcorn for Chicago after receiving her degree. It was there where Lillian accepted a teaching position with the Chicago Board of Education. It was also in Chicago where she met and later married Mr. Lonnie E. Adams. This union was blessed with one daughter, Larissa J. Adams. Education and enriching the lives of young people became her lifelong commitment.

Mrs. West-Adams will always be remembered as a warm and giving person. Whether it was her family, friends or community, she was willing to go the extra mile. In closing Mr. Speaker, I would like to say that Mrs. Lillian West-Adams made a tremendous contribution to the future of America by imparting knowledge to countless numbers of young people. My prayers go out to her family.

SENSE OF CONGRESS URGING CRITICISM OF PEOPLE'S REPUBLIC OF CHINA FOR HUMAN RIGHTS ABUSES IN CHINA AND TIBET AT ANNUAL MEETING OF UNITED NATIONS COMMISSION ON HUMAN RIGHTS

SPEECH OF

HON. JOHN EDWARD PORTER

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 9, 1999

Mr. PORTER. Mr. Speaker, I rise today in strong support of H. Con. Res. 28. Congress must strongly signal the administration in urging the United Nations to criticize China's human rights record.

Let me start by thanking the gentleman from New York (Mr. GILMAN) for bringing this resolution to the floor, and so many of my other colleagues including the gentleman from California (Mr. LANTOS), the gentleman from Virginia (Mr. WOLF), and the gentlewoman from California (Ms. PELOSI) for their efforts to focus the attention of this body on the human rights situation in China.

China recognizes the U.N. Declaration of Human Rights as does this great Nation of ours. Unfortunately, China's recognition of this monumental document lives only on paper. China has proven through its repeated mistreatment of its citizens, its continuing genocide in Tibet, and the lack of fundamental freedom of religion and expression that it does not stand for the most basic of human rights. The United States must no longer accept China's defiance of the precepts of the U.N. Declaration on Human Rights, which the rest of the international community accepts and lives by.

China is witnessing the worst crackdown on dissent since the days immediately following the Tiananmen Square massacre. Since this crackdown began in November, the United States along with the international community has done little to condemn China. When three prominent dissidents were given absurd prison